

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF \_\_\_\_\_

In re Helen Racanelli  
Debtor

Case No. 16-22617  
Reporting Period: May 2021  
Social Security # 2778  
(last 4 digits only)

MONTHLY OPERATING REPORT  
(INDIVIDUAL WAGE EARNERS)

File with the Court and submit a copy to the United States Trustee within 20 days after the end of the month and submit a copy of the report to any official committee appointed in the case.

(Reports for Rochester and Buffalo Divisions of Western District of New York are due 15 days after the end of the month, as are the reports for Southern District of New York.)

REQUIRED DOCUMENTS	Form No.	Document Attached	Explanation Attached
Schedule of Cash Receipts and Disbursements	MOR-1 (INDV)		
Bank Reconciliation (or copies of debtor's bank reconciliations)	MOR-1 (CONT)		
Copies of bank statements			
Disbursement Journal	MOR-2 (INDV)		
Balance Sheet	MOR-3 (INDV)		
Copies of tax returns filed during reporting period			
Summary of Unpaid Post-petition Debts	MOR-4 (INDV)		
Status of Secured Notes, Leases, Installment Payments	MOR-5 (INDV)		
Debtor Questionnaire	MOR-6 (INDV)		

I declare under penalty of perjury (28 U.S.C. Section 1746) that the documents attached to this report are true and correct to the best of my knowledge and belief.

Signature of Debtor Helen Racanelli

Date 5/7/2021

Signature of Joint Debtor

Date \_\_\_\_\_

In re Helen Racanelli  
DebtorCase No. 16-22617  
Reporting Period:                   **INDIVIDUAL DEBTOR CASH RECEIPTS AND CASH DISBURSEMENTS**

(This Form must be submitted for each bank account maintained by the Debtor)

Amounts reported should be per the debtor's books, not the bank statement. The beginning cash should be the ending cash from the prior month or, if this is the first report, the amount should be the balance on the date the petition was filed. Attach the bank statements and a detailed list of all disbursements made during the report period that includes the date, the check number, the payee, the transaction description, and the amount. A bank reconciliation must be attached for each account. [See MOR-1 (CONT)]

	Current Month Actual	Cumulative Filing to Date Actual
Cash - Beginning of Month	<u>250,322.85</u>	
<b>RECEIPTS</b>		
Wages (Net)	<u>5,649.80</u>	
Interest and Dividend Income		
Alimony and Child Support		
Social Security and Pension Income		
Sale of Assets		
Other Income (attach schedule)		
Total Receipts	<u>5,649.80</u>	
<b>DISBURSEMENTS</b>		
<b>ORDINARY ITEMS:</b>		
Mortgage Payment(s)		
Rental Payment(s)		
Other Secured Note Payments		
Utilities	<u>167.99</u>	
Insurance		
Auto Expense	<u>321.14</u>	
Lease Payments		
IRA Contributions		
Repairs and Maintenance		
Medical Expenses	<u>560.45</u>	
Food, Clothing, Hygiene	<u>2005.90</u>	
Charitable Contributions		
Alimony and Child Support Payments		
Taxes - Real Estate		
Taxes - Personal Property		
Taxes - Other (attach schedule)		
Travel and Entertainment	<u>291.98</u>	
Gifts		
Other (attach schedule)		
Total Ordinary Disbursements	<u>1,011.11</u>	
<b>REORGANIZATION ITEMS:</b>		
Professional Fees		
U. S. Trustee Fees		
Other Reorganization Expenses (attach schedule)		
Total Reorganization Items		
<b>Total Disbursements (Ordinary + Reorganization)</b>		
<b>Net Cash Flow (Total Receipts - Total Disbursements)</b>		
Cash - End of Month (Must equal reconciled bank statement)	<u>260,625.17</u>	

In re Helen Racanelli  
Debtor

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INDIVIDUAL DEBTOR CASH RECEIPTS AND CASH DISBURSEMENTS  
(continuation sheet)

BREAKDOWN OF "OTHER" CATEGORY	Current Month Actual	Cumulative Filing to Date Actual
Other Income		
Other Taxes		
Other Ordinary Disbursements		
Other Reorganization Expenses		

THE FOLLOWING SECTION MUST BE COMPLETED  
DISBURSEMENTS FOR CALCULATING U.S. TRUSTEE QUARTERLY FEES: (FROM CURRENT MONTH ACTUAL COLUMN)

TOTAL DISBURSEMENTS	
LESS: TRANSFERS TO OTHER DEBTOR IN POSSESSION ACCOUNTS	
PLUS: ESTATE DISBURSEMENTS MADE BY OUTSIDE SOURCES (i.e. from escrow accounts)	
TOTAL DISBURSEMENTS FOR CALCULATING U.S. TRUSTEE QUARTERLY FEES	

Helen Raccanelli  
Debtor

**Debtor**

Case No. 16-22617  
Reporting Period: May 2021

## BANK RECONCILIATIONS

### **Continuation Sheet for MOR-1**

A bank reconciliation must be included for each bank account. The debtor's bank reconciliation may be substituted for this page.

(Bank account numbers may be redacted to last four numbers.)

"Adjusted Bank Balance" must equal "Balance per Books"

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In re Helen Racinelli  
Debtor

Case No. 16-22617  
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## **DISBURSEMENT JOURNAL**

## **CASH DISBURSEMENTS**

## BANK ACCOUNT DISBURSEMENTS

**Total Disbursements for the Month**

In re Helen Racanelli  
Debtor

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### BALANCE SHEET

The Balance Sheet is to be completed on an accrual basis only. Pre-petition liabilities must be classified separately from post-petition obligations.

ASSETS	BOOK VALUE AT END OF CURRENT REPORTING MONTH	BOOK VALUE ON PETITION DATE OR SCHEDULED AMOUNT
<b>SCHEDULE A REAL PROPERTY</b>		
Primary Residence		
Other Property ( <i>attach schedule</i> )		
<b>TOTAL REAL PROPERTY ASSETS</b>		
<b>SCHEDULE B PERSONAL PROPERTY</b>		
Cash on Hand		
Bank Accounts		
Security Deposits		
Household Goods & Furnishings		
Books, Pictures, Art		
Wearing Apparel		
Furs and Jewelry		
Firearms & Sports Equipment		
Insurance Policies		
Annuities		
Education IRAs		
Retirement & Profit Sharing		
Stocks		
Partnerships & Joint Ventures		
Government & Corporate Bonds		
Accounts Receivable		
Alimony, maintenance, support or property settlements		
Other Liquidated Debts		
Equitable Interests in Schedule A property		
Contingent Interests		
Other Claims		
Patents & Copyrights		
Licenses & Franchises		
Customer Lists		
Autos, Trucks & Other Vehicles		
Boats & Motors		
Aircraft		
Office Equipment		
Machinery, supplies, equipment used for business		
Inventory		
Animals		
Crops		
Farming Equipment		
Farm Supplies		
Other Personal Property ( <i>attach schedule</i> )		
<b>TOTAL PERSONAL PROPERTY</b>		
<b>TOTAL ASSETS</b>		

In re Helen Racine  
Debtor

Case No. 16-226017  
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Secured Debt		
Priority Debt		
Unsecured Debt		
<b>TOTAL PRE-PETITION LIABILITIES</b>		
<b>TOTAL LIABILITIES</b>		

In re Helen Racinelli  
Debtor

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**SUMMARY OF UNPAID POST-PETITION DEBTS**

	Number of Days Past Due				
	Current	0-30	31-60	61-90	Over 91
Mortgage					
Rent					
Secured Debt/Adequate Protection Payments					
Professional Fees					
Other Post-Petition debt ( <i>list creditor</i> )					
Total Post-petition Debts					

Explain how and when the Debtor intends to pay any past due post-petition debts.

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In re HeLEN RARCHELLI  
Debtor

Case No. 16-22617  
Reporting Period: MAY 2021

**POST-PETITION STATUS OF SECURED NOTES, LEASES PAYABLE  
AND ADEQUATE PROTECTION PAYMENTS**

NAME OF CREDITOR	SCHEDULED MONTHLY PAYMENT DUE	AMOUNT PAID DURING MONTH	TOTAL UNPAID POST- PETITION
TOTAL PAYMENTS			

**INSTALLMENT PAYMENTS**

TYPE OF POLICY	CARRIER	PERIOD COVERED	PAYMENT AMOUNT & FREQUENCY

In re Helen Racanelli  
Debtor

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### DEBTOR QUESTIONNAIRE

Must be completed each month. If the answer to any of the questions is "Yes", provide a detailed explanation of each item. Attach additional sheets if necessary.	Yes	No
1 Have any funds been disbursed from any account other than a debtor in possession account this reporting period?		
2 Is the Debtor delinquent in the timely filing of any post-petition tax returns?		
3 Are property insurance, automobile insurance, or other necessary insurance coverages expired or cancelled, or has the debtor received notice of expiration or cancellation of such policies?		
4 Is the Debtor delinquent in paying any insurance premium payment?		
5 Have any payments been made on pre-petition liabilities this reporting period?		
6 Are any post petition State or Federal income taxes past due?		
7 Are any post petition real estate taxes past due?		
8 Are any other post petition taxes past due?		
9 Have any pre-petition taxes been paid during this reporting period?		
10 Are any amounts owed to post petition creditors delinquent?		
11 Have any post petition loans been received by the Debtor from any party?		
12 Is the Debtor delinquent in paying any U.S. Trustee fees?		
13 Is the Debtor delinquent with any court ordered payments to attorneys or other professionals?		

# Wells Fargo Everyday Checking

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HELEN RACANELLI  
DEBTOR IN POSSESSION  
CH 11 CASE # 16-22617 ((SNY))  
16 RIVERSIDE PL  
DOBBS FERRY NY 10522-1605

## Questions?

Available by phone 24 hours a day, 7 days a week:  
We accept all relay calls, including 711

**1-800-742-4932**

*En español:* 1-877-727-2932

*Online:* wellsfargo.com

*Write:* Wells Fargo Bank, N.A. (348)  
P.O. Box 6995  
Portland, OR 97228-6995

## You and Wells Fargo

Thank you for being a loyal Wells Fargo customer. We value your trust in our company and look forward to continuing to serve you with your financial needs.

## Account options

A check mark in the box indicates you have these convenient services with your account(s). Go to wellsfargo.com or call the number above if you have questions or if you would like to add new services.

Online Banking	<input checked="" type="checkbox"/>	Direct Deposit	<input checked="" type="checkbox"/>
Online Bill Pay	<input type="checkbox"/>	Auto Transfer/Payment	<input type="checkbox"/>
Online Statements	<input checked="" type="checkbox"/>	Overdraft Protection	<input type="checkbox"/>
Mobile Banking	<input checked="" type="checkbox"/>	Debit Card	<input type="checkbox"/>
My Spending Report	<input checked="" type="checkbox"/>	Overdraft Service	<input type="checkbox"/>



## IMPORTANT ACCOUNT INFORMATION

The following dedicated text telephone/telecommunication device for the deaf (TTY/TDD) lines are being retired on March 5, 2021: 800-877-4833, 800-419-2265 and 800-600-4833. We accept relay-assisted calls, including calls from the 711 service, when customers call any Wells Fargo customer service toll-free phone number. Wells Fargo will continue to provide excellent service to our deaf or hard of hearing customers and customers with speech disorders.

### Statement period activity summary

Beginning balance on 5/1	\$258,322.85
Deposits/Additions	5,649.80
Withdrawals/Subtractions	- 3,347.48
<b>Ending balance on 5/31</b>	<b>\$260,625.17</b>

Account number: 573

HELEN RACANELLI  
DEBTOR IN POSSESSION  
CH 11 CASE # 16-22617 ((SNY))

*New York account terms and conditions apply*

For Direct Deposit use  
Routing Number (RTN):

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**Overdraft Protection**

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo branch.

**Transaction history**

Date	Check Number	Description	Deposits/ Additions	Withdrawals/ Subtractions	Ending daily balance
5/3		Purchase Return authorized on 05/01 Walgreens #11291 Dobbs Ferry NY S611123481801873 Card 6549	12.00		
5/3		Purchase authorized on 04/29 Ardsley Cucina Ardsley NY S581119723070319 Card 6549		28.13	
5/3		Purchase authorized on 05/01 Hudson Pharmacy An Ossining NY S301121532813912 Card 6549		56.18	
5/3		Purchase authorized on 05/01 Walgreens #11291 Dobbs Ferry NY S581121697105614 Card 6549		117.98	
5/3		Metlife P C Ins Paymnt May 21 xxxx1485 Racanelli Helen		224.70	257,907.86
5/4		Purchase authorized on 05/02 Salon 877 Ardsley NY S581122619843591 Card 6549		250.85	
5/4		Purchase authorized on 05/03 Sams Italian Resta Dobbs Ferry NY S381123845801487 Card 6549		18.00	257,639.01
5/5		Zelle to Racanelli Sophia on 05/05 Ref #Rp0Bfjbp3	100.00		257,539.01
5/6		Purchase authorized on 04/30 Paypal *Loft 402-935-7733 CT S381121080792224 Card 6549		53.90	257,485.11
5/7		Purchase authorized on 04/30 Paypal *BananaRepu 402-935-7733 NM S301120853361217 Card 6549		33.64	
5/7		Zelle to Racanelli Sophia on 05/07 Ref #Rp0Bfw7Pw7	50.00		257,401.47
5/10		Zelle to Racanelli Sophia on 05/08 Ref #Rp0BG63Dq4	100.00		
5/10		Purchase authorized on 05/08 Metate Mexican Res Dobbs Ferry NY S381129000499350 Card 6549		42.11	
5/10		Purchase authorized on 05/09 Slice*Knappzzaii Slicelife.Com NY S381129526860126 Card 6549		70.13	257,189.23
5/11		Recurring Payment authorized on 05/10 Tmobile*Auto Pay 800-937-8997 WA S301130444233276 Card 6549		163.00	257,026.23
5/12		Purchase authorized on 05/11 Walgreens #11291 Dobbs Ferry NY S301131854508480 Card 6549		101.89	256,924.34
5/13		Purchase authorized on 05/12 Battaglia Brothers Dobbs Ferry NY S581132795394206 Card 6549		56.77	256,867.57
5/14		MT Vernon Bd of Reg Salary 210514 21290000 Racanelli, Helen M	2,818.90		
5/14		Zelle to Racanelli Sophia on 05/14 Ref #Rp0Bhf13Gv	100.00		259,586.47
5/17		Purchase authorized on 05/13 Moxy Hotels By Mar Boston MA S461134158873530 Card 6549		291.98	
5/17		Purchase authorized on 05/14 Walgreens #11291 Dobbs Ferry NY S381135060072623 Card 6549		121.33	
5/17		Purchase authorized on 05/15 Vioc Ge6603 Elmsford NY P00000000186158136 Card 6549		96.44	
5/17		Purchase authorized on 05/15 Saks Off 5th 819 29 Ta White Plains NY P00000000377168479 Card 6549		88.68	
5/17		Purchase authorized on 05/15 Tjmaxx #0 425 N Centra Hartsdale NY P00000000176157794 Card 6549		37.99	
5/17		Purchase authorized on 05/15 Walgreens #11291 Dobbs Ferry NY S301135791624436 Card 6549		63.07	
5/17		Purchase authorized on 05/15 Ardsley Market F 645 Saw Ardsley NY P00461136069822057 Card 6549		48.80	
5/17		Purchase authorized on 05/16 C-Town 114 N Broadway Tarrytown NY P00461136699385578 Card 6549		78.09	258,760.09
5/19		Purchase authorized on 05/18 Nike Boston Volley WWW.Nevolleyb AZ S381138854144691 Card 6549		13.80	
5/19		Recurring Payment authorized on 05/18 Spotify USA 877-7781161 NY S301139048887545 Card 6549		4.99	
5/19		Purchase authorized on 05/19 Decicco S 014180 21 Cente Ardsley NY P00461139735722753 Card 6549		148.73	258,592.57

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#### **Transaction history (continued)**

Date	Check Number	Description	Deposits/ Additions	Withdrawals/ Subtractions	Ending daily balance
5/24		Purchase authorized on 05/23 Stop & Shop 0530 390 B Dobbs Ferry NY P0000000673804438 Card 6549		269.21	258,323.36
5/25		Purchase authorized on 05/23 Just Salad Brooklyn NY S30114373384996 Card 6549		20.10	
5/25		Purchase authorized on 05/24 The Ferryman Cafe Dobbs Ferry NY S461144717576749 Card 6549		35.98	
5/25		Purchase authorized on 05/25 Mom's Organic Market Dobbs Ferry NY P00461145843974977 Card 6549		141.70	258,125.58
5/26	140	Check		100.00	258,025.58
5/27		MT Vernon Bd of Reg Salary 210527 21290000 Racanelli, Helen M	2,818.90		
5/27		Zelle to Racanelli Sophia on 05/27 Ref #Rp0Bkj8F5		100.00	260,744.48
5/28		Purchase authorized on 05/26 Tst* Frank Pepe S Yonkers NY S381146699859537 Card 6549		25.86	
5/28		Purchase authorized on 05/28 Foodtown #530 Hasting on Hu NY P00000000981556187 Card 6549		93.45	260,625.17
<b>Ending balance on 5/31</b>					<b>260,625.17</b>
<b>Totals</b>			<b>\$5,649.80</b>	<b>\$3,347.48</b>	

*The Ending Daily Balance does not reflect any pending withdrawals or holds on deposited funds that may have been outstanding on your account when your transactions posted. If you had insufficient available funds when a transaction posted, fees may have been assessed.*

#### **Summary of checks written (checks listed are also displayed in the preceding Transaction history)**

Number	Date	Amount
140	5/26	100.00

#### **Monthly service fee summary**

For a complete list of fees and detailed account information, see the disclosures applicable to your account or talk to a banker. Go to [wellsfargo.com/feefaq](http://wellsfargo.com/feefaq) for a link to these documents, and answers to common monthly service fee questions.

Fee period 05/01/2021 - 05/31/2021	Standard monthly service fee \$10.00	You paid \$0.00
<b>How to avoid the monthly service fee</b>	Minimum required	This fee period
Have any <b>ONE</b> of the following account requirements		
• Minimum daily balance	\$500.00	\$256,867.57 <input checked="" type="checkbox"/>
• Total amount of qualifying direct deposits	\$500.00	\$5,637.80 <input checked="" type="checkbox"/>
• Age of primary account owner	17 - 24	<input type="checkbox"/>
• The fee is waived when the account is linked to a Wells Fargo Campus ATM or Campus Debit Card		

The Monthly service fee summary fee period ending date shown above includes a Saturday, Sunday, or holiday which are non-business days.  
Transactions occurring after the last business day of the month will be included in your next fee period.

RCRC

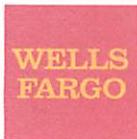
## **IMPORTANT ACCOUNT INFORMATION**

#### **Can we reach you when it's really important?**

Don't miss suspicious-activity alerts and critical account information. Please make sure your contact information is current by:

- Signing on to [wellsfargo.com](http://wellsfargo.com) or the Wells Fargo Mobile® app and navigating to the Update Contact Information page via My Profile

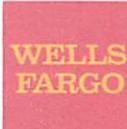
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- Contacting the phone number at the top of your statement
- Visiting a branch

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### Worksheet to balance your account

Follow the steps below to reconcile your statement balance with your account register balance. Be sure that your register shows any interest paid into your account and any service charges, automatic payments or ATM transactions withdrawn from your account during this statement period.

**A** Enter the ending balance on this statement. \$ \_\_\_\_\_

**B** List outstanding deposits and other credits to your account that do not appear on this statement. Enter the total in the column to the right.

Description	Amount
Total	\$

**C** Add **A** and **B** to calculate the subtotal.

+ \$ \_\_\_\_\_

= \$ \_\_\_\_\_

**D** List outstanding checks, withdrawals, and other debits to your account that do not appear on this statement. Enter the total in the column to the right.

Number/Description	Amount
Total	\$

**E** Subtract **D** from **C** to calculate the adjusted ending balance. This amount should be the same as the current balance shown in your register.

- \$ \_\_\_\_\_

= \$ \_\_\_\_\_

### General statement policies for Wells Fargo Bank

■ To dispute or report inaccuracies in information we have furnished to a Consumer Reporting Agency about your accounts. You have the right to dispute the accuracy of information that Wells Fargo Bank, N.A. has furnished to a consumer reporting agency by writing to us at Overdraft Collection and Recovery, P.O. Box 5058, Portland, OR 97208-5058. Please describe the specific information that is inaccurate or in dispute and the basis for the dispute along with supporting documentation. If you believe the information furnished is the result of identity theft, please provide us with an identity theft report.

■ In case of errors or questions about your electronic transfers, telephone us at the number printed on the front of this statement or write us at Wells Fargo Bank, P.O. Box 6995, Portland, OR 97228-6995 as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

1. Tell us your name and account number (if any).
2. Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.
3. Tell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

Helen Racanelli

May 2021